<u> </u>								oplication or Docket Number					
	PATENT A	PPLICATIO Effect	19881592										
		CLAIMS AS	FILED - I (Column				_	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							Γ	RATE	FEE	ĺ	RATE	FEE	
FOR			NUMBER FILED NUMBE			R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			3 minus 20= * /			3		X\$ 9=		OR	X\$18=	324	
INDEPENDENT CLAIMS			minus 3 = * /					X40=		OR	X80=	80	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=	00	
* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTAL		OR	TOTAL	111200		
CLAIMS AS AMENDED - PART II								1017.2		10	OTHER	THAN	
		(Column 1)	(Column 2) (Co			(Column 3)		SMALL ENTITY		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
MEN	Independent		Minus	***		=		X40=		OR	X80=		
<b>L</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]	+135=		OR	+270=		
										OR	TOTAL		
	(Column 1) (Column 2) (Column 3						•	ADDIT. FEE		ion	ADDIT. FEE		
		(Column 1)			EST	(Column 5)	<b>1</b> i	7	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<i>(12)</i>	]=	]	X40=		OR	X80=		
	FIRST PRESE	NTATION OF N	IULTIPLE DEI	PENDENT	CLAIM		ן נ	+135=		OR	+270=		
										OR	TOTAL		
									<u> </u>		ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	ነ ,			•			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	ï	
WEI	Independent	•	Minus	***		=	]	X40=		OR	X80=		
	FIRST PRESI	ENTATION OF I	NULTIPLE DE	PENDEN	T CLAIM					1			
			**************************************		MON in an	olumo 3		+135=		OR			
1 **	* If the ntry in column 1 is less than the entry in column 2, writ "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
1	The "Highest Nu	mber Previously F	aid F r (Total	r Independ	dent) is th	e highest numb	ber fo	und in the ap	propriate bo	ox in c	olumn 1.		